								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD									1				
Effective October 1, 2003								10,677,675					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA TYPE		NTITY	OR	OTHER SMALL		
TOTAL CLAIMS					-		RA	TE	FEE	7	RATE	FEE	
FOR			NUMBER	FILED	NUMBER EXTRA		BASI	C FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		*10		X\$	9=		OR	X\$18=	180	
INDEPENDENT CLAIMS				inus 3 =	*3		X4	3=		OR	X86=	255	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT				+14	15=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							ТО	ΓAL		OR	TOTAL	1,208	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMA	SMALL ENTITY OF			OTHER THAN SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO	EST BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4:	3=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	5-			+290=		
	1,7,15,20,24,26						<u> </u>	OTAL		OR	TOTAL		
								ADDIT. FEE OR ADDIT. FEE					
AMENDMENT B	· · · · · · · · · · · · · · · · · · ·	(Column 1) CLAIMS	1	(Colun		(Column 3)			ADDI-			ADDI	
		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	USLY	PRESENT EXTRA	RAT	ΓE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ :	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X43	} <u>=</u>			X86=	-	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
						•	+14			OR	+290=	_	
TOTAL ADDIT. FEE										OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MON	Total	*	Minus	**		= ,	X\$ 9	)=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X43			. 1	X86=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR			
t If the patry in column 1 is less than the patry in column 0 units #0" in column 0										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT. FEE		
		mber Previously Paid					ound in th	е арр	ropriate box	in colu	umn 1.		